

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



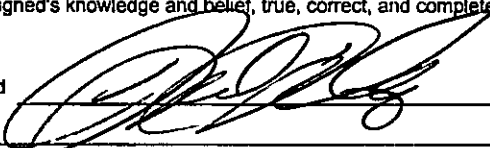
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U - <u>9400</u>	2 Fiscal Year Covered From <u>1</u> / <u>1</u> / 2004 Through <u>12</u> / <u>31</u> / 2004
3 Name and address of person filing Name <u>RUSSELL</u> <u>R</u> <u>ORTIZ</u> P O Box, Bldg, Room No, if any Street <u>C/O MLBPA, 12 E 49TH STREET</u> City <u>NEW YORK</u> State <u>New York</u> ZIP Code + 4 <u>10017</u>	4 Name, file number, and address of labor organization Name <u>MLBPA</u> Labor Organization File Number <u>064-727</u> P O Box, Building and Room Number, if any Street <u>12 E 49TH STREET</u> City <u>NEW YORK</u> State <u>New York</u> ZIP Code + 4 <u>10017</u>
5 Position in labor organization <u>PLAYER REPRESENTATIVE</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name, if any) Name Trade Name, if any P O Box, Bldg, Room No, if any Street City State ZIP Code + 4	7 a Nature of Interest, Transaction, or Income 7 b. Amount

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete (See the section on penalties in the instructions)		
Signed 	On <u>8/15/05</u> Date	<u>480 539-7929</u> Telephone Number

Name of Person Filing **RUSSELL ORTIZ**

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)Name **DONRUSS PLAYOFF, LP**

Trade Name, if any

P O Box, Bldg, Room No, if any

Street **2300 E RANDOL MILL RD**City **ARLINGTON**State **Texas** ZIP Code + 4 **76011****9 Business deals with**

- ☒ a Labor Organization
☐ b Trust
☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing**MLBPA LICENSEE****11 b Approximate dollar value of such dealing****\$5,750,369****12 a Nature of interest held or income received****PAYMENTS FOR AUTOGRAPHING BASEBALL CARDS****12 b Amount****\$9,620**

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any)

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State ZIP Code + 4

14 a Nature of payment**13 b Is the Business an Employer ☐ or Consultant ☐ ?****14 b Amount of payment.**

Name of Person Filing RUSSELL ORTIZ

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name FLEER/SKYBOX INTERNATIONAL LP

Trade Name, if any

P O Box, Bldg, Room No, if any

Street 1120 CSC PLAZA, ROUTE 73

City MOUNT LAUREL

State New Jersey

ZIP Code + 4 08054

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State

ZIP Code + 4

11 a Nature of such dealing

MLBPA LICENSEE

11 b Approximate dollar value of such dealing

\$15,000

12 a Nature of interest held or income received

PAYMENTS FOR SIGNING BASEBALL CARDS

12 b Amount

\$1,840

Name of Person Filing **RUSSELL ORTIZ**File Number **U-****Part B Continuation Page**

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any).Name **HILLERICH & BRADSBY CO , INC**

Trade Name, if any

P O Box, Bldg , Room No , if any **P O BOX 35700**Street **800 W MAIN STREET**City **LOUISVILLE**State **Kentucky** ZIP Code + 4 **40232****9 Business deals with**☒ **a Labor Organization**☐ **b Trust**☐ **c. Employer****10 If 9 b or 9 c is checked give trust or employer's name**

Name

Trade Name, if any

P O Box, Bldg , Room No , if any

Street

City

State ZIP Code + 4

11.a Nature of such dealing**MLBPA LICENSEE****11 b Approximate dollar value of such dealing****\$52,047****12 a Nature of interest held or income received****PAYMENTS FOR ENDORSEMENTS OF PRODUCTS****12 b Amount****\$31,297**

Name of Person Filing RUSSELL ORTIZ

File Number U-

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name NIKE USA, INC

Trade Name, if any

P O Box, Bldg, Room No, if any

Street ONE BOWERMAN DRIVE

City BEAVERTON

State Oregon ZIP Code + 4 97005

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg, Room No, if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

MLBPA LICENSEE

11 b Approximate dollar value of such dealing

\$108,269

12 a Nature of interest held or income received

PAYMENTS FOR PRODUCT ENDORSEMENTS

12 b Amount.

\$6,650